

Medicare Checklist- Enrollment in Medicare Part B

Leaving employment after turning 65

Name: _____ Employee ID/SS#: _____

Department Name: _____ Last Day of employment: _____

[] Medicare is a Federal health insurance program created for individuals age 65 and older, as well as individuals with certain medical conditions or disabilities. **You qualify for full Medicare benefits if:**

- **You are a U.S. citizen** or a permanent legal resident who has lived in the United States for at least five years. **You are receiving Social Security or have worked long enough to be eligible for those benefits but are not yet collecting them. You or your spouse is a government employee** or retiree who has not paid into Social Security but has paid Medicare payroll taxes while working).

Original Medicare consists of Medicare Part A and Medicare Part B;

- Medicare Part A is hospital insurance, (free). It helps cover Inpatient hospital care, skilled nursing facility, hospice care and home health care.
- Medicare Part B is Medicare health insurance, (has a premium). It helps cover Doctor's visits, Ambulance services and Durable medical equipment.

[] Employees leaving MUSC that are eligible for Medicare should review the PEBA Medicare Handbook. ***If eligible,*** Medicare Part A and Part B coverage will be your primary coverage and your State retiree coverage would be your secondary coverage. The State retiree insurance coverage for Medicare eligible retirees would be considered your "Medicare Supplement plan" to your Medicare coverage. Active coverage will end on the first of the following month after you leave employment.

[] Eligibility for retirement is not the same as eligibility for retiree State insurance coverage. Only PEBA Insurance can determine eligibility for 'retiree' insurance coverage, (funded or non-funded). Eligibility for retiree insurance is based on several factors. The Benefits Department recommends that you send PEBA Insurance a completed Employment Verification Record in advance with a request to verify your eligibility for retiree insurance, (provide the date you plan on retiring). https://www.peba.sc.gov/sites/default/files/employment_verification.pdf PEBA will research your records and send you verification of your eligibility for retiree insurance coverage. If you participate in the State ORP your Benefits Administrator will need to sign the EVF on your behalf, (as plan administrator).

[] If retiring or separating employment, contact your MUSC University Benefits Administrator at benefits@musc.edu **90 days** before leaving employment to review your insurance options after you separate employment.

Enrolling in Medicare part A & B is separate from enrolling in the State retiree insurance coverage. If retiring/separating from MUSC after turning 65;

- You will need to complete form CMS-40B, 'application for enrollment in Medicare Part B'.
- Your Benefits Administrator will complete the [Medicare Employment Verification Form](#), (form # CMS-L564), and return to you. You will then need to forward the completed forms to the Social Security Office for processing.

[] Contact the Social Security Administration at least **90 days** before you retire to provide the [Medicare Employment Certification form](#) and [Medicare Part B application form](#) to ensure that you/and your covered dependents enroll, (if

eligible), in the Medicare Part A and Part B coverage. The Medicare coverage needs to go into effect on the same date as your retiree coverage, (if eligible).

Social Security has a special enrollment rule for employees who end active employment after age 65. **Please note:** the HR Benefits Department will assist you with the Medicare CMS-L564 forms. We do not administer or handle the Medicare enrollment process. You will need to enroll independently from the HR-Benefits Department for Medicare. For more information, contact the Social Security Administration directly at 800-772-1213 or visit www.medicare.gov.

[] PEBA Insurance automatically enrolls Medicare-eligible retirees and their Medicare-eligible dependents in Express Scripts Medicare. This drug program is a Medicare Part D prescription drug program imbedded in your State retiree health coverage. PEBA does not charge an additional premium for prescription drug coverage

[] New prescription ID cards will be sent to each Express Scripts Medicare participant. If you (or your dependents) are not eligible for Medicare, you will not receive a new prescription ID card.

[] If you enroll in prescription drug coverage with another Medicare Part D plan (not the State Health Plan), you will lose all prescription drug benefits with the State Health Plan. Your monthly health premiums will remain the same.

[] For most members, Express Scripts Medicare, (State retiree prescription component), is more advantageous than the non-Medicare drug program offered to active employees.

[] You will receive new insurance cards for your retiree health coverage, the cards will have the same BIN# number as your MUSC health insurance card. If you have any healthcare expenses/claims incurred after enrolling in retiree coverage, your Medicare B would pay part of the claim first, (primary), and your retiree coverage will pay the remainder of the claim.

[] Please update your healthcare providers when services are rendered after you leave employment; let your providers know your Medicare A and B are now primary coverage and your retiree coverage under PEBA is secondary.

[] Please note that if you **enroll only** in Medicare Part A and Part B when you leave employment and lose employer's group insurance, (i.e., you don't enroll in retiree State coverage or an outside Medicare supplemental plan), there is no guaranteed issue Medicare supplement plan or a second open enrollment for a Medicare supplement plan, (on the market). The only way one can obtain a Medicare supplement/Medi-gap plan is with medical evidence, (if one has any medical issues, one will be denied or pay an astronomical premium due to poor health).

[] If you travel outside of the USA, Medicare will not pay a portion of your health claims or supplies outside of the United States. The term "outside of United States means anywhere other than the 50 states of United States, the District of Columbia, Puerto Rico, The US Virgin Islands, Guam, American Samoa, and the Northern Mariana Islands, Canada, Mexico, etc. The State retiree insurance will only pay the portion of claim they are required to pay as the 'secondary' payer. If you travel outside of the USA, you should consider 'travelers' health insurance', (coverage that will pay/cover claims that Medicare would normal pay). For more information, [please refer to Medicare coverage outside of the United States](#).